

## PART B - FEE(S) TRANSMITTAL

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64779

7590

06/12/2010

CARLSON GASKEY & OLDS  
 400 W MAPLE ST 350  
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(Depositor's name)  
 \_\_\_\_\_  
 (Signature)  
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/589,479	08/14/2006	William Veronaci	60469-092PUS1;PA-000.0519	8352

TITLE OF INVENTION: TENSILE SUPPORT STRENGTH MEASUREMENT SYSTEM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION PER DUE	PREV. PAID ISSUE FEE	TOTAL PUB(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/20/2010

EXAMINER	ART UNIT	CLASS/SUBCLASS
WEST, JEFFREY R	2857	702-042000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Carlson, Gaskey & Olds PC  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Otis Elevator Company

Farmington, CT

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:  
 Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 A check is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1482 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)  
 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 8/20/2010

Typed or printed name

David J. Gaskey

Registration No. 37,139

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and sending the completed application form to the USPTO. This estimate does not include the time you are required to complete this form if you are acting as your own attorney or agent. If you are acting as your own attorney or agent, you should send the completed application form to the Chief Patent Examiner, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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